

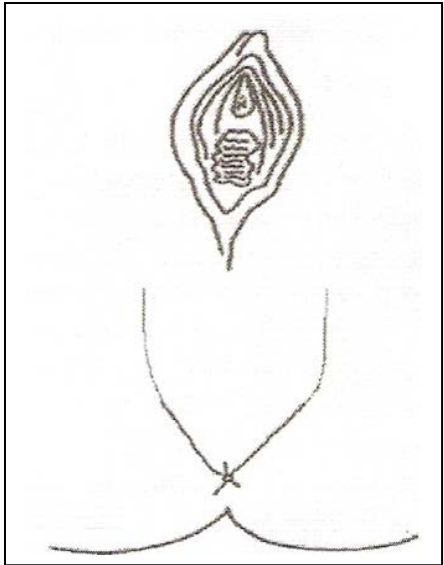
# Appendix A – Operative Pro forma



## Third/ Fourth Degree Perineal Tear Repair

*Form to be completed for all women who have sustained a third or fourth degree perineal tear*

1. What degree of tear was this? Third degree  Fourth degree
2. If **third** degree, was there a  
i) Partial (<50%)   
ii) Complete (>50%) disruption of the **external** sphincter
3. Was there disruption of the internal sphincter? Yes  No
4. Mode of delivery: NVB  Ventouse  FD  Rotational forceps
5. Birthweight - ..... Maternal Weight / BMI- .....
6. Maternal Complication (GDM, HT etc) .....
7. Analgesia during delivery : Nil  entonox  pethidine  epidural
8. Grade of the most senior person present at the time of repair?  
Sen. midwife  Sen. RMO  Reg.  Sen. Reg.  Consultant
9. Place of repair: Labour suite  OT
10. Anaesthesia administered for the repair: Regional  General
11. Method of repair of the external sphincter: Overlapping  End-to-End
12. What suture material used for sphincter repair? .....
13. Intra-operative antibiotics? Yes  No
14. Post operative antibiotics prescribed? Yes  No
15. Post operative laxatives prescribed? Yes  No
16. Post operative catheterization? Yes  No
17. PV/PR examination after completing repair? Yes  No
18. Physiotherapy referral? Yes  No
19. Follow up appointment made at 6 weeks? Yes  No
20. How was the vagina repaired?  
.....
21. How was the perineum repaired?  
.....



Name and Qualification:

Date: